

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	SW	32	5/21
FORMALITY REVIEW	H.T	913	06/29/01
RESPONSE FORMALITY REVIEW	MD	1017	10/10/01
	SW	1091	1/08/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 additional sheets are used, staple additional sheet here

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BEST AVAILABLE COPY

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